Date: _____

| AO 440 (Rev. 00/12) Summons in a Civil Action | |
|--|---|
| UNITED STAT | TES DISTRICT COURT |
| | _ District of |
| | |
| Plaintiff(s) V. Defendant(s) |))) ()) ()) () () () () () () () () |
| | , |
| SUMMON | S IN A CIVIL ACTION |
| To: (Defendant's name and address) | |
| A lawsuit has been filed against you. | |
| | |
| are the United States or a United States agency, or an P. 12 (a)(2) or (3) — you must serve on the plaintiff a | on you (not counting the day you received it) — or 60 days if you officer or employee of the United States described in Fed. R. Civ. in answer to the attached complaint or a motion under Rule 12 of motion must be served on the plaintiff or plaintiff's attorney, |
| If you fail to respond, judgment by default wi You also must file your answer or motion with the con | ill be entered against you for the relief demanded in the complaint. urt. |

Signature of Clerk or Deputy Clerk

CLERK OF COURT

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Civil Action No.

PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))

| was re | This summons for (na ceived by me on (date) | ame of individual and title, if ar | · · · - | | | |
|--------|--|------------------------------------|---------------------------------------|--------|----------|--|
| was ic | • | d the summons on the ind | | | | |
| | | a the summons on the ma | on (date) | ; or | | |
| | ☐ I left the summons at the individual's residence or usual place of abode with (name) | | | | | |
| | , a person of suitable age and discretion who resides there, | | | | | |
| | on (date), and mailed a copy to the individual's last known address; or | | | | | |
| | | nons on (name of individual) | 1 1 10 0 | | , who is | |
| | designated by law to | accept service of process | s on behalf of (name of organization) | | | |
| | | | | _ ; or | | |
| | ☐ I returned the sum | nmons unexecuted because | e | | ; or | |
| | ☐ Other (<i>specify</i>): | | | | | |
| | | | | | | |
| | My fees are \$ | for travel and \$ | for services, for a total of \$ | | | |
| | I declare under penalty of perjury that this information is true. | | | | | |
| Date: | | | | | | |
| Date. | | _ | Server's signature | | | |
| | | _ | Printed name and title | | | |
| | | _ | Server's address | | | |

Additional information regarding attempted service, etc: